

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MM	10521	6/1/07
O.I.P.E. CLASSIFIER		15	7-3-01
FORMALITY REVIEW	64	JC135	8-14-00
RESPONSE FORMALITY REVIEW	415	4.54	11-27-05

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
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41	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheets

(LEFT INSIDE)